### 201612150200814042

### FEC FORM 2 STATEMENT OF CANDIDACY

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16 DEC 15 PM 3: 12

_						
1.	(a) Name of Candidate (in full)	150				
	YOUNG, TODD, CHRISTOPH (b) Address (number and street)	IEH, , ☐ Check if addre	honned		2. Candidate's FEC Identif	ication Number
	PO BOX 1053	Li Olicox II addic	.aa calangeu		S6IN00191	ICAGOTI NUMBER
	(c) City, State, and ZIP Code			· · · · · · · · · · · · · · · · · · ·	3. Is This New	Amended
_	BLOOMINGTON	IN	4740		Statement (N)	OR 🗡 (A)
4.	Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate		6. State & Distr	rict of Candidate	
	HEI OBEIOART ARTT	Centate	····	""		
	DE	SIGNATION OF PR	INCIPAL	CAMPAIGN	COMMITTEE	
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 election(s).  (year of election)				_ ,,	
	NOTE: This designation should be f	filed with the appropriate offi	ice listed in t	he instructions.		
	(a) Name of Committee (in full) FRIENDS OF TODE	O YOUNG, INC.				
	(b) Address (number and street) PO BOX 1053					
	(c) City, State, and ZIP Code					
	BLOOMINGTON			IN	47402	
8.	I hereby authorize the following name candidacy.  NOTE: This designation should be fi				nmittee, to receive and expe	nd funds on behalf of my
	(a) Name of Committee (in full) YOUNG VICTORY	COMMITTEE			•	
	(b) Address (number and street) PO BOX 1053					•
_	(c) City, State, and ZIP Code			· · · · · · · · · · · · · · · · · · ·		
	BLOOMINGTON			IN	47402	
	I certify that I have exa	mined this Statement and to	the best of	my knowledge ai	nd belief it is true, correct an	d complete.
Si	gnature of Candidate	mg	2		Date	16
NC	OTE: Submission of farse, erroneous,	or incomplete information n	nay subject t	he person signin	g this Statement to penalties	of 2 U.S.C. §437g.
		1		<u> </u>		FEC FORM 2 (REV. 02/2009)

# 201612150200814043

### FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)			Page 2 /
DESIGNATION OF OTH (Including Join	ER AUTHORIZED C		[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my prin candidacy.	cipal campaign committee, to	receive and expend funds	on behalf of my
NOTE:This designation should be filed with the principal cam	paign committee.		
(a) Name of Committee (in full)  VETERANS FOR DEFENDING THE I	MAJORITY		,,
(b) Address (number and street) 228 S WASHINGTON STREET SUITE 115			
(c) City, State and ZIP Code  ALEXANDRIA	VA	22314	
DESIGNATION OF OTH	IER AUTHORIZED C		[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my prin candidacy.	cipal campaign committee, to	receive and expend funds	on behalf of my
NOTE:This designation should be filed with the principal cam	paign committee.		
(a) Name of Committee (in full) KEEP THE SENATE RED 2016			
(b) Address (number and street) 228 S WASHINGTON STREET SUITE 115		<u>.                                    </u>	
(c) City, State and ZIP Code	•		,
ALEXANDRIA	VA	22314	
DESIGNATION OF OTH (Including Join	ER AUTHORIZED C		[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my princ candidacy.	cipal campaign committee, to	receive and expend funds	on behalf of my
NOTE: This designation should be filed with the principal came	paign committee.		
(a) Name of Committee (in full)		-	<del></del>
2016 BROOKS AND YOUNG HOOSI	ER REPUBLICAN	VICTORY COI	MMITTEE
(b) Address (number and street) 4703 WOODWAY LANE NW			
(c) City, State and ZIP Code		<del></del>	
		20016	

## 201612150200814044

### FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 3 /
	OTHER AUTHORIZED COMMITTEES  Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my candidacy.	y principal campaign committee, to receive and expend funds or	n behalf of my
NOTE: This designation should be filed with the principal	campaign committee.	
(a) Name of Committee (in full) THE FOUNDERS COMMITTEE		
(b) Address (number and street) 228 S WASHINGTON STREET SUITE 115		
(c) City, State and ZIP Code		
ALEXANDRIA	VA 22314	
	OTHER AUTHORIZED COMMITTEES g Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my candidacy.	y principal campaign committee, to receive and expend funds o	n behalf of my
NOTE: This designation should be filed with the principal	campaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		·
(c) City, State and ZIP Code		
	OTHER AUTHORIZED COMMITTEES g Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my candidacy.	y principal campaign committee, to receive and expend funds o	n behalf of my
NOTE: This designation should be filed with the principal	campaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		. <del>.</del>
(c) City, State and ZIP Code		

### Faxed or or Hand Delivered

DANA K. MACCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232

4/04/16

### United States Senate

OFFICE OF THE SECRETARY

WASHINGTION, DC 20510-7116 PHONE(202) 224-0322

OFFICE OF PUBLIC RECORDS

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SEN PATCH



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